PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09934574

		CLAIMS AS		(Column 1)		(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			(1					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			l/ minus 20=		* O			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 = *		* _ C	. 0		X40=		OR	X80=	*
MULTIPLE DEPENDENT CLAIM PRESE								+135=		OR	+270=	(9)
* If	the difference	in column 1 is	less than zero, enter "0" in			column 2	L	TOTAL		OR	TOTAL	710
	CLAIMS AS AMENDED - PART II										OTHER	THAN
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL E	NTITY	OR	SMALL	ENTITY
* AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	### ### ***	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	_	=		X\$ 9=	* 5	OR	X\$18=	
	Independent		Minus	***		=	lΓ	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405	1. The state of th	*14.	270	
			·	=			L	+135=	= ·	OR	+270=	
			· January	7			. А	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS	4	(Colur		(Column 3)		•			1	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	1	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=	1	OR	X\$18=	
	Independent	* = 2	Minus	***		=]	X40=	in indicates	OR	X80=	£ 1- 374.21
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		┚┞	+135=			+270=	
						·	L	TOTAL		OR	TOTAL	
							A	DDIT. FEE	•	OR	ADDIT. FEE	
-		(Column 1) CLAIMS		(Colur		(Column 3)	1	·.			*	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		= '		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	1	X40=			X80=	*
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	A40=		OR	∧00 =	
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." **If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												